

ACCOUNTS RECEIVABLE 674A/R SAMPLES
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(1) TO STATE CONTROLLER'S OFFICE:

☐ ADMIN. & DISBURSEMENTS

☐ PPSD/PAYROLL SERVICES

PPSD UNIT DESTINATION:

☐ PAYROLL☐ BENEFITS

☐ DISABILITY☐ W-2/Non USPS

☐ RETIREMENT☐ DEDUCTIONS

(2) SOCIAL SECURITY NUMBER

(3) NAME

(4) POSITION NUMBER

AGENCY

UNIT

CLASS

SERIAL

1

2

CHANGE METHOD OF COLLECTION

REMARKS:

☐ FROM AGENCY COLLECTION TO PAYROLL DEDUCTION - *BALANCE TO BE COLLECTED*

\$

NET

☐ FROM PAYROLL DEDUCTION TO AGENCY COLLECTION - *BALANCE TO BE COLLECTED*

\$

NET

☐ REVERSE PAYROLL DEDUCTION A/R

PLEASE REFUND AMOUNT COLLECTED

\$

NET

☐ OVER-COLLECTION OF PAYROLL DEDUCTION A/R - PAY PERIODS OF DEDUCTION

PLEASE REFUND AMOUNT COLLECTED

\$

NET

DATES/HOURS ON DOCK:

12

1

2

3

4

5

6

7

8

9

10

11

12

13

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16

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31

(5) ESTABLISH/CORRECT/ADJUST AS INDICATED BELOW:

☐ ACCOUNTS RECEIVABLE

☐ REDEPOSIT WITH A/R

☐ TRANSFER OF FUNDS WITH A/R

☐ REVERSE AGENCY COLLECTION A/R

(6)	POSITION	ISSUE DATE			PAY PERIOD			SALARY TYPE	SALARY FULL	TIME WORKED			APPT. FRAC.	GROSS TYPE	PMT. TYPE	PAY SUFFIX	ADJ. CODE	EARNINGS I.D.	SHIFT CODE	GROSS	NET PAY	ACCT. REC. OR WARRANT NO.	RELEASED	RETURNED	HELD BY CONTROLLER
		MO.	DAY	YR.	T	MO.	YR.			STD.	DAYS	HOURS													
A	PMT. PER SCO WRNT. REG.																								
B	PMT. S/B																								
C	OVER-PMT.																								

OVERPAYMENT TO BE RECOVERED BY:

☐ AGENCY COLLECTION

☐ PAYROLL DEDUCTION (Specify type)

☐ 1 DEDUCTION FROM NEXT APPLICABLE PAY PERIOD

☐ (NO.) DEDUCTIONS BEGINNING WITH PAY PERIOD

☐ 2% OF SALARY RATE OR 1/12 OF ACCOUNTS RECEIVABLE NET

(7) COMPLETED BY

TELEPHONE NUMBER AND EXTENSION

FROM (Agency Name)

AUTHORIZED SIGNATURE

DATE SIGNED

I HEREBY CERTIFY THAT THE EMPLOYEE NAMED ABOVE IS ENTITLED TO THIS PAY BASED ON THE APPROPRIATE GOVERNMENT CODES AND/OR EMPLOYEE HAS BEEN NOTIFIED OF THE IMPENDING ACCOUNT RECEIVABLE. PRIOR TO SUBMITTING THIS 674 A/R, THE EMPLOYEE WAS GIVEN AREASONABLE TIME TO RESPOND.

Payroll information correct in accordance with B/C Rule 660.

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PPSD UNIT DESTINATION:

☐ PAYROLL

☐ BENEFITS

☐ DISABILITY

☐ W-2/Non USPS

☐ RETIREMENT

☐ DEDUCTIONS

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CHANGE METHOD OF COLLECTION

REMARKS:

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\$

NET

☐ FROM PAYROLL DEDUCTION TO AGENCY COLLECTION - *BALANCE TO BE COLLECTED*

\$

NET

☐ REVERSE PAYROLL DEDUCTION A/R

PLEASE REFUND AMOUNT COLLECTED

\$

NET

☐ OVER-COLLECTION OF PAYROLL DEDUCTION A/R - PAY PERIODS OF DEDUCTION

PLEASE REFUND AMOUNT COLLECTED

\$

NET

☐ REVERSE AGENCY COLLECTION A/R

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☐ TRANSFER OF FUNDS WITH A/R

DATES/HOURS ON DOCK:

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

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NET

☐ REVERSE PAYROLL DEDUCTION A/R

PLEASE REFUND AMOUNT COLLECTED

\$

NET

☐ OVER-COLLECTION OF PAYROLL DEDUCTION A/R - PAY PERIODS OF DEDUCTION

PLEASE REFUND AMOUNT COLLECTED

\$

NET

☐ REVERSE AGENCY COLLECTION A/R

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☐ W-2/Non USPS

☐ RETIREMENT

☐ DEDUCTIONS

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☐ REDEPOSIT WITH A/R

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CHANGE METHOD OF COLLECTION

FROM AGENCY COLLECTION TO PAYROLL DEDUCTION - *BALANCE TO BE COLLECTED*

\$

NET

FROM PAYROLL DEDUCTION TO AGENCY COLLECTION - *BALANCE TO BE COLLECTED*

\$

NET

REVERSE PAYROLL DEDUCTION A/R

PLEASE REFUND AMOUNT COLLECTED

\$

NET

OVER-COLLECTION OF PAYROLL DEDUCTION A/R - PAY PERIODS OF DEDUCTION

PLEASE REFUND AMOUNT COLLECTED

\$

NET

REVERSE AGENCY COLLECTION A/R

DATES/HOURS ON DOCK:

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PLEASE REFUND AMOUNT COLLECTED

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NET

☐ OVER-COLLECTION OF PAYROLL DEDUCTION A/R - PAY PERIODS OF DEDUCTION

PLEASE REFUND AMOUNT COLLECTED

\$

NET

DATES/HOURS ON DOCK:

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☐ 1 DEDUCTION FROM NEXT APPLICABLE PAY PERIOD

☐ _____ (NO.) DEDUCTIONS BEGINNING WITH PAY PERIOD _____

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☐ DISABILITY☐ W-2/Non USPS

☐ RETIREMENT☐ DEDUCTIONS

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REMARKS:

☐ FROM AGENCY COLLECTION TO PAYROLL DEDUCTION - *BALANCE TO BE COLLECTED*

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NET

☐ FROM PAYROLL DEDUCTION TO AGENCY COLLECTION - *BALANCE TO BE COLLECTED*

\$

NET

☐ REVERSE PAYROLL DEDUCTION A/R

PLEASE REFUND AMOUNT COLLECTED

\$

NET

☐ OVER-COLLECTION OF PAYROLL DEDUCTION A/R - PAY PERIODS OF DEDUCTION

PLEASE REFUND AMOUNT COLLECTED

\$

NET

(5) ESTABLISH/CORRECT/ADJUST AS INDICATED BELOW:

☐ ACCOUNTS RECEIVABLE

☐ REDEPOSIT WITH A/R

☐ TRANSFER OF FUNDS WITH A/R

☐ REVERSE AGENCY COLLECTION A/R

DATES/HOURS ON DOCK:

12345678910111213141516171819202122232425262728293031

(6)	POSITION	ISSUE DATE			PAY PERIOD			SALARY TYPE	SALARY FULL	TIME WORKED			APPT. FRAC.	GROSS TYPE	PMT. TYPE	PAY SUFFIX	ADJ. CODE	EARNINGS I.D.	SHIFT CODE	GROSS	NET PAY	ACCT. REC. OR WARRANT NO.	RELEASED	RETURNED	HELD BY CONTROLLER
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CHANGE METHOD OF COLLECTION

FROM AGENCY COLLECTION TO PAYROLL DEDUCTION - *BALANCE TO BE COLLECTED*

\$

NET

FROM PAYROLL DEDUCTION TO AGENCY COLLECTION - *BALANCE TO BE COLLECTED*

\$

NET

REVERSE PAYROLL DEDUCTION A/R

PLEASE REFUND AMOUNT COLLECTED

\$

NET

OVER-COLLECTION OF PAYROLL DEDUCTION A/R - PAY PERIODS OF DEDUCTION

PLEASE REFUND AMOUNT COLLECTED

\$

NET

REVERSE AGENCY COLLECTION A/R

REMARKS:

DATES/HOURS ON DOCK:

1

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DATES/HOURS ON DOCK:

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☐ DISABILITY

☐ W-2/Non USPS

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☐ DEDUCTIONS

(2) SOCIAL SECURITY NUMBER

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☐ REVERSE PAYROLL DEDUCTION A/R

PLEASE REFUND AMOUNT COLLECTED

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☐ OVER-COLLECTION OF PAYROLL DEDUCTION A/R - PAY PERIODS OF DEDUCTION

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DATES/HOURS ON DOCK:

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(6)	POSITION	ISSUE DATE			PAY PERIOD			SALARY TYPE	SALARY FULL	TIME WORKED			APPT. FRAC.	GROSS TYPE	PMT. TYPE	PAY SUFFIX	ADJ. CODE	EARNINGS I.D.	SHIFT CODE	GROSS	NET PAY	ACCT. REC. OR WARRANT NO.	RELEASED	RETURNED	HELD BY CONTROLLER
		MO.	DAY	YR.	T	MO.	YR.			STD.	DAYS	HOURS													
A	PMT. PER SCO WRNT. REG.																								
B	PMT. S/B																								
C	OVER-PMT.																								

OVERPAYMENT TO BE RECOVERED BY:

☐ AGENCY COLLECTION

☐ PAYROLL DEDUCTION (*Specify type*)

☐ 1 DEDUCTION FROM NEXT APPLICABLE PAY PERIOD

☐ _____ (NO.) DEDUCTIONS BEGINNING WITH PAY PERIOD _____

☐ 2% OF SALARY RATE OR 1/12 OF ACCOUNTS RECEIVABLE NET

(7) COMPLETED BY

TELEPHONE NUMBER AND EXTENSION

()

FROM (Agency Name)

AUTHORIZED SIGNATURE

DATE SIGNED

I HEREBY CERTIFY THAT THE EMPLOYEE NAMED ABOVE IS ENTITLED TO THIS PAY BASED ON THE APPROPRIATE GOVERNMENT CODES AND/OR EMPLOYEE HAS BEEN NOTIFIED OF THE IMPENDING ACCOUNT RECEIVABLE. PRIOR TO SUBMITTING THIS 674 A/R, THE EMPLOYEE WAS GIVEN AREASONABLE TIME TO RESPOND.

Payroll information correct in accordance with B/C Rule 660.

(1) TO STATE CONTROLLER'S OFFICE:

☐ ADMIN. & DISBURSEMENTS

☐ PPSD/PAYROLL SERVICES

PPSD UNIT DESTINATION:

☐ PAYROLL

☐ BENEFITS

☐ DISABILITY

☐ W-2/Non USPS

☐ RETIREMENT

☐ DEDUCTIONS

(2) SOCIAL SECURITY NUMBER

(3) NAME

(4) POSITION NUMBER

AGENCY

UNIT

CLASS

SERIAL

1

2

CHANGE METHOD OF COLLECTION

REMARKS:

☐ FROM AGENCY COLLECTION TO PAYROLL DEDUCTION - *BALANCE TO BE COLLECTED*

\$

NET

☐ FROM PAYROLL DEDUCTION TO AGENCY COLLECTION - *BALANCE TO BE COLLECTED*

\$

NET

☐ REVERSE PAYROLL DEDUCTION A/R

PLEASE REFUND AMOUNT COLLECTED

\$

NET

☐ OVER-COLLECTION OF PAYROLL DEDUCTION A/R - PAY PERIODS OF DEDUCTION

PLEASE REFUND AMOUNT COLLECTED

\$

NET

(5) ESTABLISH/CORRECT/ADJUST AS INDICATED BELOW:

☐ ACCOUNTS RECEIVABLE

☐ REDEPOSIT WITH A/R

☐ TRANSFER OF FUNDS WITH A/R

☐ REVERSE AGENCY COLLECTION A/R

DATES/HOURS ON DOCK:

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(6)	POSITION	ISSUE DATE			PAY PERIOD			SALARY TYPE	SALARY FULL	TIME WORKED			APPT. FRAC.	GROSS TYPE	PMT. TYPE	PAY SUFFIX	ADJ. CODE	EARNINGS I.D.	SHIFT CODE	GROSS	NET PAY	ACCT. REC. OR WARRANT NO.	RELEASED	RETURNED	HELD BY CONTROLLER
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A	PMT. PER SCO WRNT. REG.																								
B	PMT. S/B																								
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OVERPAYMENT TO BE RECOVERED BY:

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☐ PAYROLL DEDUCTION (*Specify type*)

☐ 1 DEDUCTION FROM NEXT APPLICABLE PAY PERIOD

☐ _____ (NO.) DEDUCTIONS BEGINNING WITH PAY PERIOD _____

☐ 2% OF SALARY RATE OR 1/12 OF ACCOUNTS RECEIVABLE NET

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PPSD UNIT DESTINATION:

☐ PAYROLL

☐ BENEFITS

☐ DISABILITY

☐ W-2/Non USPS

☐ RETIREMENT

☐ DEDUCTIONS

(2) SOCIAL SECURITY NUMBER

(3) NAME

(4) POSITION NUMBER

AGENCY

UNIT

CLASS

SERIAL

1

2

CHANGE METHOD OF COLLECTION

REMARKS:

☐ FROM AGENCY COLLECTION TO PAYROLL DEDUCTION - *BALANCE TO BE COLLECTED*

\$

NET

☐ FROM PAYROLL DEDUCTION TO AGENCY COLLECTION - *BALANCE TO BE COLLECTED*

\$

NET

☐ REVERSE PAYROLL DEDUCTION A/R

PLEASE REFUND AMOUNT COLLECTED

\$

NET

☐ OVER-COLLECTION OF PAYROLL DEDUCTION A/R - PAY PERIODS OF DEDUCTION

PLEASE REFUND AMOUNT COLLECTED

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NET

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☐ ACCOUNTS RECEIVABLE

☐ REDEPOSIT WITH A/R

☐ TRANSFER OF FUNDS WITH A/R

☐ REVERSE AGENCY COLLECTION A/R

DATES/HOURS ON DOCK:

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31

(6)	POSITION	ISSUE DATE			PAY PERIOD			SALARY TYPE	SALARY FULL	TIME WORKED			APPT. FRAC.	GROSS TYPE	PMT. TYPE	PAY SUFFIX	ADJ. CODE	EARNINGS I.D.	SHIFT CODE	GROSS	NET PAY	ACCT. REC. OR WARRANT NO.	RELEASED	RETURNED	HELD BY CONTROLLER
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A	PMT. PER SCO WRNT. REG.																								
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☐ PAYROLL DEDUCTION (*Specify type*)

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☐ DISABILITY

☐ W-2/Non USPS

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(3) NAME

(4) POSITION NUMBER

AGENCY

UNIT

CLASS

SERIAL

1

2

CHANGE METHOD OF COLLECTION

REMARKS:

☐ FROM AGENCY COLLECTION TO PAYROLL DEDUCTION - *BALANCE TO BE COLLECTED*

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☐ FROM PAYROLL DEDUCTION TO AGENCY COLLECTION - *BALANCE TO BE COLLECTED*

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PLEASE REFUND AMOUNT COLLECTED

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DATES/HOURS ON DOCK:

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CHANGE METHOD OF COLLECTION

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☐ FROM PAYROLL DEDUCTION TO AGENCY COLLECTION - *BALANCE TO BE COLLECTED*

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☐ REVERSE AGENCY COLLECTION A/R

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